## VOTER NOTIFICATION STUB THIS PORTION WILL BE RETURNED TO YOU BY YOUR COUNTY ELECTION BOARD

## Dear Applicant:

TO SEAL

Dear Applicant:  Your voter registration application has been received and is now being processed. After your registration has been approved we will mail to you a wallet sized Voter Identification Card showing the municipality, ward and/or election district of your residence.  COUNTY BOARD OF ELECTIONS  (COUNTY STAMP WILL APPEAR HERE)	turn this card to you in ten days. If not returned, you should contact your County Board.  DO NOT DETACH  NAME JOHN V. Bubeen at ADDRESS GIVEN.  DO NOT DETACH  NAME JOHN V. Bubeen at ADDRESS GIVEN.  POST OFFICE Larbandale in ZIP CODE 18401
O NOT BEGIN THIS PORTION UNTIL YOU HAVE READ THE INSTRUCTIONS  N THE REVERSE SIDE OF THIS FORM.  PLEASE TYPEWRITE OR HANDPRINT USING BLUE OR BLACK INK.  O IS This A: New Registration, Change of Name, Change of Address, Change of Party Note: Federal or State employees, who wish to retain voting residence in the county of last residence, check Print Your Full Name Here  O Print Your Full Name Here  O DECTRICATION  FOR OFFICIAL USE ONLY  City/Boro/Twp. of Ward  District  Ward  District  District  FOR OFFICIAL USE ONLY  City/Boro/Twp. of City/Boro/Twp. of Just residence, check Card Card Card Card Card Card Card Card	DIRECTIONS FOR FORM COMPLETION AND GENERAL INSTRUCTIONS  1. Be sure to complete numbers (1)-(23) where eppticebie. 2. If you will require assistence in voting, complete number (18). 3. You must sign your name in ink on the two spaces provided [numbers (19) and (20)] at the bottom of the other side of this form. If you are unable to sign this epplication for registration, you are required to make your merk end have it witnessed by an official who can administer oeths. (Notary Public, District Justice, etc.)  4. If anyone assists you in the completion of this form, they must sign their name end address on the space provided [number (22)]. 5. Be sure to complete the address portion [number (23)] located above these instructions. 6. This application must be received by your county board of elections at least 30 deys before the election at which you wish to vote. 7. You are eligible to vote if you have been a citizen of the United States for at least one month, a resident of Pennsylvania, your county, and the election district for at least thirty deys before the election end you will be 18 years old on or before the dey after the election at which you wish to vote. 8. If you are currently registered and you have not moved or feiled to vote at least once during the last two calendar years, you do not have to
It lead eighteen years of age, end ahell have reaided in the Commonwealth of Pennsylvanus and in the election district thirty days, that I am legally qualified to vote, that I affirm the immation provided herein is true and correct, and I fully understaend that the application will be accepted for all purposes as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a material purpose as the equivalent of an affidavit, and if it contains a	BUSINESS REPLY MAIL FIRST CLASS PERMIT NO. 3058 HARRISBURG, PA  POSTAGE WILL BE PAID BY ADDRESSEE SECRETARY OF THE COMMONWEALTH  % Voter Registration Office Lackawanna County Court House North Washington Avenue Scranton, PA 18503

TO SEAL

Lackewenne County Court House North Washington Avenue Scranton, PA 18503 (717) 961-6737

POSTMASTER: RETURN WITHIN 3 DAYS

(23) NOTE: Complete the card at RIGHT: Print clearly your full name and address. The County Board of Elections should return this card to you in ten days if not

Postage To Be Affixed By County

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